

Registration Form

The Summit 2006
May 28 - June 2, Nashville

Department of Health
Bureau of Alcohol and Drug Abuse Services

- Use separate form for each registrant.
- Multiple individuals per registration will not be accepted.

Please type or print clearly to avoid name badge error.

First name for badge _____

Full Name _____

Last 4 digits of your SSN: ____ Month & day of birth ____/____

Day phone (____) _____ Fax (____) _____

Organization _____

Mailing address _____

City _____ County _____

State _____ Zip _____

Please list Two-Day Workshops in order of preference. Acceptance is dependent upon availability on date received.

Monday & Tuesday Workshops

Thursday - Friday Workshops

1st Choice: MT- _____ 1st Choice: TF- _____

2nd Choice: MT- _____ 2nd Choice: TF- _____

3rd Choice: MT- _____ 3rd Choice: TF- _____

List Tuesday Night Bonus (1, 2, or 3) in order of preference.

1st Choice: TNB- _____

2nd Choice: TNB- _____

The registration fee of \$350 includes the Sunday Reception, 30 hours of training, lunch Monday through Thursday, and the Thursday Evening Banquet. A special registration fee is available for professionals working: all state agencies, BADAS contract agencies, regional health offices, and local health departments. If requesting the special registration fee, please provide your current job title and brief job description on agency letterhead.

☐ Registration (Full Week), \$350

☐ Special Registration fee (Full Week), \$300

☐ Mon. Tues. Registration fee, \$175

☐ Wednesday With Ackerman/Lerner/Larsen, \$100

☐ Thur. Fri. Registration fee, \$175

APPLICATION FOR HOUSING/MEALS

Belmont Campus Lodging/Meals

Reservations must be made to receive lodging/meals (\$250.00). The lodging cost covers a Sunday check-in (4:00 - 6:00 p.m.) and Friday departure (12:00 p.m.). The accompanying meal ticket includes lunch Monday through Thursday, dinner Monday through Wednesday, and breakfast on Wednesday and Friday. Please include \$250 with registration fee.

No split week rates are available.

Reservation for Housing/Meals? Yes ☐ No ☐

NOTE: For your convenience, during the week of The Summit, two downtown Nashville hotels are offering a room rate of \$75 per night for any participant. For reservations call Doubletree Hotel (615)244-8200 Single/Double and request “**The Summit**” group rate.

Payment

- Make checks and purchase orders payable to the **A&D Council of Middle Tennessee**.
- Registration is confirmed only upon payment OR receipt of a signed purchase order.
- Please list registrants' name(s) on checks and purchase orders.

Total: _____

Form of Payment:

☐ Check/Money Order ☐ Purchase Order ☐ Credit Card No. _____ Exp. ____ / ____

Registration address: A&D Council of Middle Tennessee
2612 Westwood Drive
Nashville, TN 37204
(615) 269-0029 ext. 111 Fax Number: (615)269-0299